

Statement of Understanding of Policy and Employee Assistance Program

We, the undersigned, are committed to a drug free policy. As operators, crewmembers, vendors, and/or independent contractors we are committed to the strict enforcement of United States Coast Guard regulations applicable to vessels licensed to carry passengers or engaged in commercial service. We will prohibit the use, sale, distribution, manufacture, or possession of illegal drugs or drug paraphernalia. This policy is designed to protect public safety by testing for substances at or above threshold levels of metabolites including, but not limited to, those listed below:

- Amphetamines (Speed)..... 250 ng/mL
-MDMA (Ecstasy).....250 ng/ml
- Benzoylecogine (Cocaine) 100 ng/mL
- Cannabinoids (Marijuana) 15 ng/mL
- Opiates (Heroin, Codeine)..... 2,000 ng/mL
- Phencyclidine (PCP) 25 ng/mL

We also recognize that while alcohol is a legal substance, performance of safety-sensitive functions is prohibited:

1. While having a breath alcohol concentration of 0.04 percent or greater as indicated by an alcohol breath test;
2. While operating any vessel and the effect of the intoxicant is apparent by observation;
3. While using alcohol; or
4. Within four (4) hours after using alcohol.

In addition, refusing to submit to an alcohol test and using alcohol within eight hours after an accident or until tested is prohibited.

To facilitate enforcement of the provisions of this policy, this company will use every legal means to deter and/or detect violations including, but not limited to, urine, breath, or blood testing of Captains, crewmembers, and independent contractors as required by DOT and USCG under the following circumstances:

1. Pre-employment. A condition of hiring a new employee is the passing of a pre-employment drug test.
2. Reasonable Suspicion. In situations where the employer is aware of facts that would lead him/her to suspect the drug policy has been violated, a drug and/or alcohol test will be conducted.
3. Post Incident. In case of a "serious marine incident" as defined in 46 CFR Part 4, the employer must determine who should be tested.
4. Random. Any time during an employee's work schedule, he/she is subject to an unannounced random test for the illegal use of drugs.
5. Periodic. As required upon license renewal, usually exempt as in 46 CFR 16.220. 6) Return to Duty. An employee who tests positive may be terminated by the employer, or alternatively, if directed to counseling or rehabilitation, as a condition of continued employment, must submit to unannounced drug tests for a specified period.

We understand that a refusal to test is deemed a positive test, resulting in *The Maritime Consortium, Inc.* notifying the Coast Guard. In addition, *The Maritime Consortium, Inc.* will report to the Coast Guard those companies who fail to fulfill their responsibilities in taking tests when notified, keeping *Maritime* notified of any crew changes, following procedures or other actions resulting in non-compliance with DOT or Coast Guard rules. We understand and consent to appropriate disciplinary action, including the possibility of termination of employment and/or services as well as possible suspension of United States Coast Guard license and/or Merchant Mariner Document, for violations of this Policy. We further recognize that chemical dependencies are a personal concern for many individuals and accordingly strongly encourage persons unable to cope with their addictions to immediately seek professional help such as is available through the confidential services of an Employee Assistance Program (EAP). Together, with the United States Coast Guard and our industry, we support the necessity for maintaining a Drug-Free Policy and pledge to abide by the provisions within.

Further, I have received information and training on the effects and consequences of controlled substance use on personal health, safety, and the work environment. This also includes the information on the behaviors and other signs of drug use or abuse. My total education and training under this company's Employee Assistance Program has been in excess of 60 minutes in length.

Agreed this ____ day of _____, 20__ Company/Vessel _____

Signature _____ Print Name _____

Owner Signature _____ Print Name _____

***Each Captain/Crewmember must sign a copy of this form and Owner should sign.
Retain with your company files.***

This statement is not a contract. Company policies, procedures, and substance abuse or EAP programs are not intended to create or alter any existing contracts between the company and its employees, contractors, or job applicants.